CERTIFICATION ENVELOPE

☐ EARLY VOTER'S BALLOT☐ GRACE PERIOD VOTER'S BALLOT

VOTER: SEAL BALLOT IN THIS ENVELOPE TO BE OPENED ONLY BY AUTHORIZED ELECTION OFFICIALS

CERTIFICATION

I,	, state that I am a	resident of Prec	inct Number	of the
(1) *Township of	(2) *City of		, or (3) *	
Ward in the City of	res	siding at	(street address)	
in such city or town in	the County of	and State	of Illinois; that I have I	ived at such
	month(s) last past; that I a	-	·	cinct at the
	Election to be	held on	(in a sut use subtrales the same	
*Fill in either (1), (2), (or (3)		(Insert montn/day/year)	
I am affiliated	with the(complete for p	orimary only)	Party.	
assistance in casting	e that I personally marke my ballot, I further attest ret with the assistance of:			
(Individual Rende	ering Assistance)			
(Address)				
	erjury as provided by law ments set forth in this certif			undersigned
DATED:				
(insert mon	th, day, year)			

(Signature of Applicant)